

*Collins***SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

United Parcel Service  
CSC Lawyers  
Incorporating Svc Inc  
150 South Perry Street  
Montgomery, AL 36104  
2007CX972 (CML/SMO) 20 SEP

2. Article Number (Copy from service)

7006 0100 0003 6638 4693

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly)	B. Date of Delivery
<i>W.B. 11/10/31</i>	
C. Signature	
<i>MESS. S. BELLAMY X</i>	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:	
U.S. MAIL U.S. POSTAL SERVICE MIDDLE DISTRICT OF ALABAMA RECEIVED	
3. Service Type	
<input checked="" type="checkbox"/> Priority Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
4. Restricted Delivery ( <input type="checkbox"/> Extra Fee) <input type="checkbox"/> Yes	

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-178